FORM D SEC Mail Processing Section UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

MAY 29 2008

FORM D

OMB APPROVAL
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Washington, DC

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY						
Prefix	Serial					
DATE RECEIVED						
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713 S. May St., Madisonville, TX 77864 (7 Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) 7500 Louis Pasteur Drive, San Antonio, TX 78229	Telephone Number (Including Area Code) Telephone Number (Including Area Code) Telephone Number (Including Area Code)
1. Enter the information requested about the issuer Name of Issuer (Telephone Number (Including Area Code) 713) 594-0049
1. Enter the information requested about the issuer Name of Issuer (Telephone Number (Including Area Code) 713) 594-0049
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) CKP Hospitality Inc. Address of Executive Offices (Number and Street, City, State, Zip Code) 713 S. May St., Madisonville, TX 77864 Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) 7500 Louis Pasteur Drive, San Antonio, TX 78229	Telephone Number (Including Area Code) 713) 594-0049
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Brief Description of Business Hotel and Accommodations Type of Business Organization Corporation Iimited partnership, already formed business trust Iimited partnership, to be formed	use specify) 08047761
Month Year Actual or Estimated Date of Incorporation or Organization: 015 018 Actual Estimate Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction)	
GENERAL INSTRUCTIONS	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Se 77d(6).	Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- ATTENTION-

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Beneficial Owner Executive Officer Director Check Box(es) that Apply: Promoter General and/or Managing Partner Full Name (Last name first, if individual) Nitin Patel Business or Residence Address (Number and Street, City, State, Zip Code) 713 S. May St., Madisonville, TX 77864 Check Box(es) that Apply: Beneficial Owner Executive Officer Director Promoter General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Beneficial Owner Executive Officer Director Check Box(es) that Apply: Promoter General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

					В. П	NFORMAT	ION ABOU	T OFFERI	NG				
	T11		1 1	!		II +c =	nn=n 314 - 3 1		ohiee-	in ~?		Yes	No
1.	Has the	issuer solo	i, or does ti			II, to non-a 1 Appendix							⊠
2.	What is	the minim	um investn					-				s	
2.	Wilatis		um mresen	TOTAL WILLIAM	III be nece	pred from i	any marvia	uu			***************************************	Yes	No
3.	Does th	e offering	permit join	t ownershi	p of a sing	le unit?							X
4.	commis If a pers or state:	sion or sim son to be lis s, list the na	ion request ilar remune ted is an ass ime of the b you may s	ration for s sociated pe roker or de	solicitation rson or ago ealer. If mo	of purchase ent of a brok ore than five	ers in conno cer or deale e (5) persoo	ection with r registered is to be list	sales of sec I with the S ed are asso	curities in t SEC and/or	he offering. with a state	:	
Ful	l Name (Last name	first, if ind	ividual)									
Bus	siness or	Residence	Address (N	lumber and	i Street, C	ity, State, Z	Lip Code)			<u>. </u>	· · · · · · · · · · · · · · · · · · ·		
Nai	me of As	sociated Br	oker or De	aler									
Sta	tes in WI	nich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	or check	individual	States)		•11•••••11•••••	*******************	***************************************	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		□ Al	States
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	IL.	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT RI	NE SC	NV SD	NH TN	NJ TX	NM UT	NY VT	NC VA	ND WA	OH WV	OK WI	OR WY	PA PR
					(
Ful	I Name (Last name	first, if ind	ividual)									
Bus	siness or	Residence	Address (1	Number an	d Street, C	City, State,	Zip Code)						
Nai	me of As	sociated Br	oker or De	aler									
Sta	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers	•					
	(Check	"All States	s" or check	individual	States)		.,	***************************************		***************	***************************************	□ A1	l States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	Н	ĪD
	IL	IN	[A]	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT RI	NE SC	NV SD	NH TN	TX	NM) UT	NY VT	NC VA	ND WA	OH WV	OK)	OR WY	PA PR
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Ful	l Name (Last name	first, if ind	ividual)									
Bus	siness or	Residence	Address (1	Number an	d Street, C	City, State,	Zip Code)	·		-			
Nai	me of As	sociated Br	oker or De	aler									···········
Sta	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	or check	individual	States)		,			******	***************************************	☐ Al	l States
	AL]	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL	IN	IA	KS	KY	[LA]	ME	MD	MA	MI OH	MN	MS	MO
	MT RI	NE SC	NV SD	NH TN	TX	NM UT	NY VT	NC VA	ND WA	WV	OK WI	OR WY	PA PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Aiready Sold
	Debt	\$	\$
	Equity		\$ 525,000.00
	✓ Common	* <u></u>	- *
	Convertible Securities (including warrants)	\$	S
	Partnership Interests		
	Other (Specify)		
	Total		
	Answer also in Appendix, Column 3, if filing under ULOE.	P	
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors		
	Non-accredited Investors		
	Total (for filings under Rule 504 only)	1	\$_525,000.00
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	The second second	Type of	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505		
	Regulation A		· · · · ·
	Rule 504		s 0.00
	Total		\$ 0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees] \$
	Printing and Engraving Costs] \$
	Legal Fees		\$ 1,500.00
	Accounting Fees		-] \$
	Engineering Fees	F] \$
	Sales Commissions (specify finders' fees separately)	_] \$
	Other Expenses (identify)	_] \$
	Total		s 1,500.00

	C. OFFERING PRICE, NUM	BER OF INVESTORS, EXPENSES AND USE OF F	ROCEEDS	
	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C—proceeds to the issuer."			\$523,500.00
5.	Indicate below the amount of the adjusted gross pro each of the purposes shown. If the amount for an check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	ny purpose is not known, furnish an estimate and fthe payments listed must equal the adjusted gross		
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		\$	_ 🗆 \$
	Purchase of real estate		□ \$	_ 🗆 \$
	Purchase, rental or leasing and installation of mac	chinery	□ •	
	and equipment			
	· ·	·		_ 🗀 🍮
	Acquisition of other businesses (including the val offering that may be used in exchange for the asso issuer pursuant to a merger)	ets or securities of another	□ \$	s
	Repayment of indebtedness		_ s	_ _ 🗆 \$
	Working capital		_ _	s
	Other (specify):		<u> </u>	
			\$	s
	Column Totals		\$_0.00	\$ <u>0.00</u>
	Total Payments Listed (column totals added)		□ s <u> </u>	.00
		D. FEDERAL SIGNATURE	· —	
sig	sissuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to fur information furnished by the issuer to any non-acc	rnish to the U.S. Securities and Exchange Commis	ssion, upon writte	
Iss	ner (Print or Type)		Date ,	
	P Hospitality Inc.	notin Patel	05/23/	08
Na	ne of Signer (Print or Type)	Title of Signer (Print or Type)		-
Niti	Patel	President		

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE		
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No K
	See Appendix, Column 5, for state response.		

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
CKP Hospitality Inc.	notin Parce	05/23/08
Name (Print or Type)	Title (Print or Type)	
Nitin Patel	President	

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				AP	PENDIX				
1	Intend to non-a investors	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		4 Type of investor and amount purchased in State (Part C-Item 2)				ification ate ULOE attach ation of granted)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL			•	ii.					
AK									
AZ	,					:			
AR									
CA	,								
со									
СТ	 								
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	APPENDIX								
1	Intend to non-a investor:	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		4 Type of investor and amount purchased in State (Part C-Item 2)				
State	Yes	No		Number of Accredited Investors	Accredited Non-Accredited				No
МО									
МТ									
NE	<u> </u>								
NV									
NH						:			
NJ				i i					
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TX		×	Common Stock	1	\$525,000.0	0			×
UT									
VT									
VA									
WA									
wv									
WI									

1	to non-a investor	2 ito sell accredited is in State	Type of security and aggregate offering price offered in state (Part C-Item 1)	4 Type of investor and amount purchased in State (Part C-Item 2)					Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
WY										
PR		The same of the same of							,	

